

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

December 19, 2007

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Kwik Shop requesting that Richard Hurt be approved as the manager of fourteen liquor licenses held.

The follow are the locations requested:

4750 Calvert	2302 Cornhusker	5900 Fremont	2940 North 1 st
2330 North 1 st	2710 'W'	2811 North 48 th	3939 'A'
3301 Holdrege	5600 Holdrege	2040 South 56 th	4400 Cornhusker
1441 North Cotner	4400 'O'		

Background information on the applicant is as follows:

Richard Hurt was born in Grand Rapids, Michigan. He attended Kelloggsville High School graduating in 1979.

Richard Hurt employment history is as follows:

Present	District Manager, Kwik Shop	Lincoln, NE.
2003 - 2007	Owner, Husker 1 Stop	Rising City, NE.
2001 - 2003	Manager, Fastenal	Winona, MN.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



**MANAGER APPLICATION
INSERT - FORM 3c**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

Office Use

RECEIVED

NOV 16 2007

Corporate manager, including their spouse, are required to adhere to the following requirements

- 1) Must be a citizen of the United States
- 2) Must be a Nebraska resident (Chapter 2 - 006)
- 3) Must provide a copy of their certified birth certificate or INS papers
- 4) Must submit their fingerprints (2 cards per person)
- 5) Must be 21 years of age or older
- 6) Applicant may be required to take a training course

**NEBRASKA LIQUOR
CONTROL COMMISSION**

Corporation/LLC information

Name of Corporation/LLC: Kwik Shop Inc.

Premise information

Premise License Number: D61232

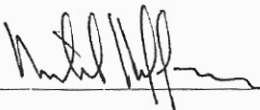
Premise Trade Name/DBA: Kwik Shop #619

Premise Street Address: 2302 Cornhusker Highway

City: Lincoln State: Nebraska Zip Code: 68521

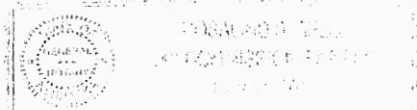
Premise Phone Number: 402-477-6020

The individual whose name is listed in the president or contact member category on either insert form 3a or 3b must sign their name below.



Michael Hoffmann, President Kwik Shop Inc.

CORPORATE OFFICER SIGNATURE
(Faxed signatures are acceptable)



Manager's information must be completed below PLEASE PRINT CLEARLY

Gender: ☒ MALE ☐ FEMALE

Last Name: Hurt First Name: Richard MI: John

Home Address (include PO Box if applicable): 7239 Pioneers Boulevard - #518

City: Lincoln State: Nebraska Zip Code: 68506

Home Phone Number: 402-484-7190 Business Phone Number: 402-488-2781

Social Security Number: Drivers License Number & State: l

Date Of Birth: Place Of Birth: Grand Rapids, MI

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

☒ YES ☐ NO

Spouse's information

Spouses Last Name: Hurt First Name: Mary
MI: K

Social Security Number: Drivers License Number & State:

Date Of Birth: Place Of Birth: Kansas City, MO

APPLICANT AND SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST 10 YEARS

APPLICANT

SPOUSE

CITY & STATE	YEAR FROM TO		CITY & STATE	YEAR FROM TO	
Lincoln, NE	2007	Now	Lincoln, NE	2007	Now
Rising City, NE	2004	2007	Rising City, NE	2004	2007
Matland, MO	1997	2004	Matland, MO	1997	2004

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
1/99	6/07	Self Employed	Self	402-484-7190
6/07	Now	Kwik Shop Inc	Jimmy Lewis	402-391-1808

Manager and spouse must review and answer the questions below

PLEASE PRINT CLEARLY

1. READ PARAGRAPH CAREFULLY AND ANSWER COMPLETELY AND ACCURATELY.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. **If more than one party, please list charges by each individual's name.**

☐ YES

☒ NO

If yes, please explain below or attach a separate page.

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state? **IF YES**, list the name of the premise. **Now applying for all Kwik Shops in Lincoln**

☒ YES

☐ NO Husker 1 Stop in Rising City

3. Do you, as a manager, have all the qualifications required to hold a Nebraska Liquor License? Nebraska Liquor Control Act (§53-131.01)

☒ YES

☐ NO

4. Have you filed the required fingerprint cards and **PROPER FEES** with this application? (The check or money order must be made out to the **Nebraska State Patrol for \$38.00 per person**)

☒ YES

☐ NO

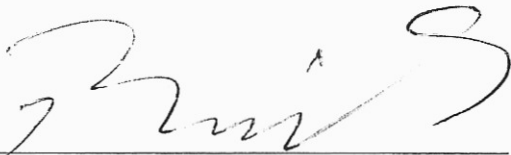
PRINTS ENC

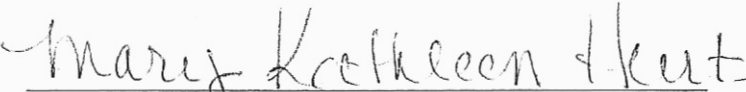
PERSONAL OATH AND CONSENT OF INVESTIGATION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, a spousal affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.


Signature of Manager Applicant
Richard John Hurt


Signature of Spouse
Mary Kathleen Hurt

State of Nebraska

County of Douglas

County of Douglas

The foregoing instrument was acknowledged before me this 13th of November 2007 by

The foregoing instrument was acknowledged before me this 13th of November 2007 by

Richard John Hurt

Mary Kathleen Hurt

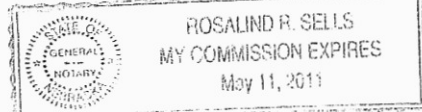

Notary Public signature


Notary Public signature

Affix Seal Here



Affix Seal Here



In compliance with the ADA, this manager insert form 3c is available in other formats for persons with disabilities.
A ten day advance period is required in writing to produce the alternate format.

Revised 5/2007

GRAND RAPIDS OSTEOPATHIC HOSPITAL
GRAND RAPIDS, MICHIGAN

This Certifies that

Richard John Hurt

was born to Mr. and Mrs. Richard Joseph Hurt

in this Hospital at 12:23 *o'clock, P.m. on* Friday

the _____ *day of* _____ 19

*In Witness Whereof the said Hospital has caused this Certificate to
be signed by its duly authorized officer, and its Official Seal to be
hereunto affixed*



P. J. [Signature]

ADMINISTRATOR

ATTENDING PHYSICIAN

FAMILY HISTORY

Hurt

Father's full name Richard Joseph Hurt

Birthplace Dwight, Nebraska Date _____

Mother's maiden name Betty Jean Covell

Birthplace Grand Rapids, Michigan Date _____

Residence at time child was born 614 Parkwood, N.E., Grand Rapids, Michigan

Sex of child Male Weight at birth 8 pounds 2 ounces. Length 19 inches

Baby's left footprint

Baby's right footprint

Mother's left thumbprint

Mother's right thumbprint

This Document should be carefully preserved. It is an important record of the facts pertaining to your child's birth. The law requires that the original certificate of birth be filed with the Vital Statistics Office at Grand Rapids, Michigan from which an official copy may be obtained.

Explain

Liquor License Investigation

Business (DBA) Kwik Shop

☒ Manager ☐ Owner ☐ Other

Name: RICHARD HURT

US Citizen ? ☒ Yes ☐ No

Has applicant ever been cited for liquor law violations ? ☒ No ☐ Yes
Explain _____

Does applicant have an interest in another liquor license ? ☒ No ☐ Yes
Explain _____

Is spouse qualified to hold a license ? Yes ☐ No ☒ N/A

How is applicant if not an owner to be paid ? ☒ Salary ☐ Hourly

How many hours will applicant be at the establishment ? 75+

Any other employment ? ☒ No ☐ Yes, explain _____

Any previous experience with a liquor license ? ☒ Yes ☐ No

Any criminal convictions ? ☒ No ☐ Yes
Comments _____

Is applicant a property owner in Lincoln ? Yes ☐ No ☒

Is applicant involved in any civil litigation ? ☒ No ☐ Yes
Comments _____

☒ Photo ☒ Records Check ☒ References
DMV
Comments _____

Interview Date 12 / 19 / 07